

WINCHCOMBE
RURAL DISTRICT COUNCIL.

— MARCH, 1914. —



ANNUAL REPORT

OF THE

Medical Officer of Health,

INCLUDING TABLES OF

VITAL STATISTICS; CASES OF INFECTIOUS
DISEASES NOTIFIED; CAUSES OF, AND AGES
AT DEATH; AND INFANTILE MORTALITY,

IN THE

WINCHCOMBE RURAL DISTRICT,

DURING THE YEAR 1913.



WILLIAM COX,

Stone House,
Winchcombe,

Medical Officer of Health.



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— TO THE —
WINCHCOMBE RURAL DISTRICT COUNCIL.

LADIES AND GENTLEMEN.

I have the honour to present my 42nd Annual Report, for the year 1913.

I also include with it four tables, giving valuable information regarding the Births, the Sickness, and the Deaths which have occurred during the year.

These forms are become more condensed than they used to be, and so are more easily understood and, therefore, of more value; and although containing all the important facts and figures of the more elaborate ones, they are less tedious and trying to compile.

The Birth-rate is only very slightly in excess of last year, viz. : 19·5 as against 18·1 per 1000. There has been a great decrease in the birth-rate of late years in this district, and, as far as I can ascertain, there is the same condition generally over the country. Up till about five or six years ago the birth-rate in this district was about 25 per 1000, which means that there were about 60 more babies born every year than there are now. Agricultural districts were able to send some fine young men and women into the towns and also into the great services of this country, besides also providing a large number as emigrants to the colonies and foreign countries. This must become, year by year, a serious and difficult problem. The country districts will not have the numbers to spare, and if the towns can find the quantity I am quite sure that the quality will be very bad.

TABLE II. shows the cases of Infectious Disease notified during the year and the localities where each one occurred. The total is only 28—quite an insignificant number in itself. Of these, 20 were cases of Scarlet Fever, 4 of Diphtheria, and 4 of Erysipelas. All the cases of Scarlet Fever and Diphtheria were removed to the Isolation Hospital, and the houses were fumigated at once and as well as circumstances would permit. In this way nothing approaching an epidemic in any case occurred.

I would like here again to refer to the usefulness of the Isolation Hospital, and to point out that, although the up-keep expenses may seem heavy, I am sure it has been the means of saving us many times from a serious and costly epidemic.

I am confident that the infective power of Scarlet Fever is considerably lessened during the past 25 years, and I predict that in course of time the disease will almost, if not entirely die out. I wish I could say the same of Measles, but I cannot.

There is great need of a Disinfecting Chamber at the Hospital and also of rooms properly constructed for patients to change into their home clothes when they leave; this is an urgent matter and I hope it will be soon carried out

TABLE III. gives the number of Deaths, their causes, and the age under certain periods. The total number of deaths is 118 as against 100 last year, raising the death-rate to 12.2. The number of persons belonging to the district, but who have died outside, is 15—a far larger number than has ever been recorded under that heading; of course many of these cases left the district years and years ago. This raises our total death-rate to 13.7 per 1000, which, although not unsatisfactory, is at least nothing to boast about.

The Infantile Death-rate, as shown in **TABLE IV.**, is 74 per 1000 births, which is quite satisfactory, especially

when compared with the returns from large manufacturing towns, where it is generally between 200 and 300 per 1000 births.

I always like to mention the excellent work done by our district nurses, and, to a large extent, the reduced Infantile death-rate is due to their care and advice.

THE DISTRICT.

The exceptionally favourable features of the district are, of course, well known to you all. How it fills up the southern portion of the Evesham Valley, as well as the northern slopes of the Cotswold Hills for a distance of about twelve miles ; how well watered it is generally ; and how it consists of about 25 or 30 villages with populations varying from 100 to about 400 inhabitants—Winchcombe and Bishop's Cleeve excepted.

The census—so far as it is published for 1911—puts the population at 9,647, spread over an area of 55,507 acres, which is equal to 5·7 persons per acre.

OCCUPATION OF THE PEOPLE.

The occupation of the people is Agricultural, including a large portion of Market Gardening and Fruit Cultivation. There is a large Paper Mill and a Fruit Canning Factory and also a Leather and Tanning Factory, all of which are always in full work, and employ regularly 200 to 300 hands, and for short special periods, considerably more.

SANITARY CONDITION.

The Sanitary Condition of the district is good and also the Water Supply generally. All the villages on the hills have springs flowing in abundance into them, and most of the vale villages are supplied by service pipes, by gravitation, from the

hills, Alderton being about the only exception ; here there is a good supply of water from wells situated in the village, and although they are amongst drains and farm-yards, pig-styes, etc., and so are liable to pollution, I can only say that during 40 years I have never found any pollution, nor has there been any illness to suggest it.

Your Council has devised a comprehensive scheme to supply Alderton and some outlying parts of Winchcombe and also Cleeve Hill and Bishop's Cleeve, and an Enquiry has been held by a Local Government Board Inspector just at the end of the year. The report has not yet been received.

SCAVENGING.

Scavenging has not been attempted at present in the district, but I think in Winchcombe it would be a great advantage.

HOUSING.

Both the Sanitary Inspector and myself have done a large amount of house to house inspection during the year. In many cases alterations and improvements have been made, and in others Closing Orders have been obtained.

Total number inspected	...	311
Houses remedied	... ..	10
Closing Orders obtained	...	15
Made habitable after Order	...	6
Demolition Orders	... ..	3
Cases of Overcrowding	...	2
Number of New Houses built	..	6

During the latter part of 1913 I made a report to you on the Housing Accommodation of the District, and, as a result, Enquiries were held in Winchcombe, Alderton and Beckford to see if there was a demand for houses in these places. Your Council is now arranging for a number of houses to be built in each place, and I think they will be immediately occupied.

SCHOOLS.

The Sanitary Condition of the Schools is good, with the exception of Hawling, which accommodates less than 20 children, and some necessary improvements are to be made.

The Schools have been closed during the past year, on my recommendation, as follows:—

Hawling, February 3rd to February 24th, on account of an Epidemic of Measles.

Dumbleton, April 7th to April 21st, ditto.

Toddington, April 18th to May 26th, ditto.

Gretton, June 2nd to July 7th, ditto.

Alderton, July 21st to August 18th, ditto

MILK SUPPLY.

I am aware that you have given great attention to the matter of Milk Supply in the district and that great improvements in the Dairies and Cowsheds have been effected, and the Acts have been well carried out.

The amount of Milk sent from this district into the large towns has enormously increased, and it is most important that every precaution should be taken to prevent its contamination.

I think an attempt should be made on a comprehensive scale to get rid of tuberculous milk; if systematically carried out it should not be difficult. It is a most important matter, and deserves your most earnest attention.

TUBERCULOSIS.

Nine cases of Pulmonary Tuberculosis have been notified during the year ; of these, four have died. The others might well be in a Sanatorium, but alas ! as I said in my last report, " Where is the Sanatorium ? " Until we can get easy admission for the poor, and for those just above the poor, we shall never make much headway against Tuberculosis.

I beg to remain,

Ladies and Gentlemen,

Your obedient Servant,

WM. COX.

Winchcombe,

February 20th, 1914.

Vital Statistics of Whole District during 1913 and previous Years.

TABLE I.

WINCHCOMBE RURAL DISTRICT.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS. †		NETT DEATHS BELONGING TO THE DISTRICT.							
		Un- corrected Number.	Nett.	Number. †	Rate.	of Non- residents registered in the District. †	of Resi- dents not registered in the District. †	Under 1 Year of Age		At all Ages.					
								Number *	Rate. †		Number *	Rate. †			
1	2	3		4	5		6	7		8	9	10	11	12	13
1908.	8840			200	22'7		138	15				17	84'5	133	15
1909.	8840			184	20'8		129	14'5				10	54'3	129	14'5
1910.	8860			208	23'4		119	13'4		6		23	110'5	125	14'1
1911.	9647			220	22'7		118	12.2		5		15	68'1	123	12'7
1912.	9647			176	18'1		100	10'3		5		9	51'1	105	10'8
1913.	9647			189	19'5		118	12'2		15		14	74	130	13'7

NOTES.—This Table is arranged to show the gross births and deaths in the district, and the births and deaths properly belonging to it with the corresponding rates. For years before 1911 some of the corrected rates probably will not be available. The rates should be calculated per 1000 of the estimated gross population. In a district in which large Public Institutions for the sick and infirm seriously affect the statistics, the rates in Columns 5 and 13 may be calculated on a nett population, obtained by deducting from the estimated gross population the average number of inmates not belonging to the district in such institutions.

* In Column 6 are to be included the whole of the deaths registered during the year as having actually occurred within the district.

In Column 12 is to be entered the number in Column 6, corrected by subtraction of the number in Column 8 and by addition of the number in Column 9. Deaths in Column 10 are to be similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

† The Medical Officer of Health will be able from the returns made to him by the local Registrar of Deaths to fill in Column 8 in accordance with the rule in the next paragraph below. The Registrar-General, either directly or through the County Medical Officer of Health, will supply the Medical Officer of Health with the particulars of deaths to be entered in Column 9; and all such deaths must be included in this Column, unless an error is detected, and its correction has been accepted by the Registrar-General. For Column 4 the Registrar-General will furnish to the Medical Officer of Health a Statement of the number of births needing to be added to or subtracted from the total supplied by the local Registrar.

‡ “Transferable deaths” are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided.

The deaths of persons without fixed or usual residence, *e.g.*, casuals, must not be included in Columns 8 or 9, except in certain instances under 3 (*b*) below. The Medical Officer of Health will state in Column 8 the number of transferable deaths of “non-residents” which are to be deducted, and will state in Column 9 the number of deaths of “residents” registered outside the district which are to be added in calculating the nett death-rate of his district.

The following special cases arise as to Transferable Deaths :—

- (1) Persons dying in Institutions for the sick and infirm, such as hospitals, lunatic asylums, workhouses, and nursing homes (but not almshouses) must be regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission, the death is not transferable. If the patient has been directly transferred from one such institution to another, the death is transferable to the district of residence at the time of admission to the first Institution.
- (2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement should be referred to the district of fixed or usual residence of the parent.
- (3) Deaths from Violence are to be referred (*a*) to the district of residence, under the general rule; (*b*) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (*c*) failing this, to the district where death occurred, if known; and (*d*) failing this, to the district where the body was found.

Area of District in acres (land and inland water)—55,507.

Number of inhabited houses—2,144, at Census of 1911.

Total population at all ages—9,647, at Census of 1911.

Average number of persons per house—4½, at Census of 1911.

ЗАДАЧА

Вопрос: Каким образом можно решить задачу?

Решение: Рассмотрим задачу.

№	Имя	Фамилия	Год рождения	Пол	Рост	Вес	Средняя температура
1	Иван	Иванов	1980	Муж	180	75	36,6
2	Петр	Петров	1985	Муж	175	70	36,5
3	Алексей	Алексеев	1990	Муж	185	80	36,7
4	Мария	Мария	1982	Жен	165	60	36,4
5	Сергей	Сергеев	1988	Муж	178	72	36,5
6	Елена	Еленова	1983	Жен	168	65	36,5
7	Александр	Александров	1987	Муж	182	78	36,6
8	Ольга	Ольга	1981	Жен	162	58	36,4
9	Дмитрий	Дмитриев	1989	Муж	188	85	36,7
10	Светлана	Светланова	1984	Жен	170	68	36,5

TABLE II.
Cases of Infectious Disease notified during the Year 1913.
WINCHCOMBE RURAL DISTRICT.

NOTIFIABLE DISEASE.	NUMBER OF CASES NOTIFIED.								TOTAL CASES NOTIFIED IN EACH LOCALITY. (e.g. Parish or Ward) of the District.														TOTAL CASES REMOVED TO HOSPITAL.	
	At all Ages.	At Ages†—Years.							1 Winchcombe	2 Lower Guiting	3 Dumbleton	4 Beckford	5 Hawling	6 Stanway	7 Gotherington	8 Toddington	9 Buckland	10 Hailes	11	12	13	14		
		Under 1	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upward.																
Small-pox ...																								
‡Cholera (C) Plague (P) ...																								
Diphtheria (including Membranous croup) ...	4	...	1	2	...	1	2		1	1	4
Erysipelas ...	4	1	2	1	...	2	...	1	1	
Scarlet fever ...	20	...	5	12	2	1	...	...	9	4	...	...	2	1	1	2	...	1	...	...	...	...	20
Typhus fever ...																								
Enteric fever ...																								
‡Relapsing fever (R) Continued fever (C) ...																								
Puerperal fever ...																								
Cerebro-spinal Meningitis ...																								
Poliomyelitis ...																								
Pulmonary Tuberculosis ...																								
§																								
TOTALS ...	28		6	14	3	4	1		13	4	2	1	2	1	1	2	1	1					24	

NOTES.—State in space below the name and position within or without the district of the isolation hospital or hospitals, sanatoria or other institutions to which the residents in the district, suffering from infectious disease, have usually been sent, and the name of the authority by whom the hospital is provided.

§ This space may be used for record of other diseases the notification (compulsory or voluntary) of which is in force in the district.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

‡ Specify the disease by initial against the figure.

* The figures should take account of any corrections made as a result of error in notification or revision of diagnosis as a result of the further course of the disease (cf. para (3) on p. 3 of the Weekly Summary of Cases of Infectious Diseases).

Winchcombe Isolation Hospital.

Total available beds, 10.

GENERAL INFORMATION				SPECIFIC INFORMATION			
PATIENT'S NAME				PATIENT'S AGE			
SEX				DATE OF BIRTH			
MARITAL STATUS				EDUCATION			
OCCUPATION				RELIGION			
ETHNICITY				LANGUAGE			
HISTORY OF PRESENT ILLNESS				PHYSICAL EXAMINATION			
PAST MEDICAL HISTORY				LABORATORY TESTS			
CURRENT MEDICATIONS				TREATMENT PLAN			
FAMILY HISTORY				PROGNOSIS			
SOCIAL HISTORY				PATIENT'S COMMENTS			
PHYSICIAN'S SIGNATURE				HOSPITAL STAMP			

...

TABLE III.
Causes of, and Ages at Death during the Year 1913.
 WINCHCOMBE RURAL DISTRICT.
 (See Notes at Back).

CAUSES OF DEATH.		Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District (A).										Total Deaths whether of "Residents" or "Non-Residents" in Institutions in the District (B).
		All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.		
1		2	3	4	5	6	7	8	9	10	11	
All causes	{ Certified (c)	118	14	2	1	3	3	13	25	57		
	{ Uncertified	...										
1. Enteric Fever	...											
2. Small-pox	...											
3. Measles	...											
4. Scarlet Fever	...	1	...	...	1						
5. Whooping Cough	...											
6. Diphtheria and Croup	...											
7. Influenza	...											
8. Erysipelas	...											
9. Phthisis (Pulmonary Tuberculosis)	...	7	...	...				2	3	1	
10. Tuberculous Meningitis	...	4	1			2				1		
11. Other Tuberculous Diseases	...											
12. Cancer, malignant disease	...	10	...	...				3	5	2	
13. Rheumatic Fever	...											
14. Meningitis (See note (d))	...	1								1		
15. Organic Heart Disease	...	25	1					2	7	15		
16. Bronchitis	...	8	...	...					3	5	
17. Pneumonia (all forms)	...	7	3	1				1		2		
18. Other diseases of Respiratory organs	...											
19. Diarrhoea and Enteritis (See note (e))	...	2	...	...						2	
20. Appendicitis and Typhlitis	...											
21. Cirrhosis of Liver	...											
21a. Alcoholism	...											
22 Nephritis and Bright's Disease	...	7						1	2		4	
23 Puerperal Fever	...											
24. Other accidents and diseases of Pregnancy and Parturition	...	2	1	...	...	...	...		1		
25. Congenital Debility and Malformation, including Premature Birth	...	3	3									
26. Violent Deaths, excluding Suicide	...	1	...	..	...	...	...		1		
27. Suicide	...											
28. Other Defined Diseases	...	40	5	1	...	1	...		7	26		
29. Diseases ill-defined or unknown	...											
TOTALS		118	14	2	1	3	3	13	25	57		
Sub-Entries.	14 (a). Cerebro-spinal Meningitis	...										
	28 (a). Poliomyelitis *	...	...	...	1						

* Sub-Entries should here be made for other deaths which it is desirable to distinguish, on account of their administrative importance or special interest (e.g., any deaths from Anthrax, Typhus or Glanders, which have been included under 28, *Other Defined Diseases*; or deaths from pneumonia other than broncho-pneumonia which have been included under 17, *Pneumonia all forms*).

NOTES TO TABLE III.

The classification and numbering of Causes of Death are those of the "Short List" on page XXV. of the Manual of the International List of Causes of Death, which should be consulted and followed in all cases of doubt.

Copies of this manual were distributed to Medical Officers of Health in 1912 by the Registrar-General, and may be purchased either directly or through any bookseller from Wymann & Sons, Fetter Lane, E.C., price 1/-.

(a) All "Transferable Deaths" of Residents, *i.e.*, of persons resident in the District who have died outside it, are to be *included* with the other deaths in columns 2-10. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who have died in the District, are in like manner to be *excluded* from these columns. For the precise meaning of the term "transferable deaths" see footnote to Table I.

The total deaths in column 2 of Table III. should equal the figures for the year in column 12 of Table I.

(b) All deaths occurring in institutions for the sick and infirm situated within the district, whether of residents or of non-residents, are to be entered in the last column of Table III.

(c) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

(d) Exclusive of "Tuberculous Meningitis" (10), but inclusive of Cerebro-Spinal Meningitis.

(e) Title 19 should be used for deaths from Diarrhoea and Enteritis at all ages. (In the "Short List" deaths from Diarrhoea and Enteritis under 2 years are included under Title 19; those at 2 years and over being placed under Title 28).

TABLE IV.

WINCHCOMBE RURAL DISTRICT.

INFANT MORTALITY.

1913. Nett Deaths from stated causes at various Ages under 1 Year of Age.

(SEE NOTE (a) AT BACK).

CAUSES OF DEATH.	Under 1 week.	1-2 weeks	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months & under 6 months.	6 months & under 9 months.	9 months & under 12 months.	Total Deaths under 1 year.
All causes { Certified Uncertified	6	1	...	1	...	1	3	1	1	14
Small-pox	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...
Scarlet fever	...	...	...	...	...	...	...	...	...	...
Whooping-Cough	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	1
Abdominal Tuberculosis (b)	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	1	...	1
Laryngitis	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...
Pneumonia (all forms)	...	...	...	...	...	...	2	...	1	3
Diarrhoea	...	...	...	...	...	...	...	...	...	...
Enteritis	...	...	...	...	...	...	...	...	...	...
Gastritis	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...
Injury at birth	1	...	...	...	...	...	...	...	...	1
Atelectasis	...	...	...	...	...	...	...	...	...	...
Congenital Malformations (c)	1	...	...	...	...	...	...	...	...	1
Premature birth	2	1	...	...	...	...	...	...	...	3
Atrophy, Debility and Marasmus.	1	...	...	...	...	...	...	...	...	1
Other Causes	1	...	...	1	...	1	...	...	...	3
	6	1		1		1	3	1	1	14

Nett Births in the year {
legitimate 180
illegitimate 9.

Nett Deaths in the year of {
legitimate infants 14.
illegitimate infants 0.

УЧЕТ
ЗАБОЛЕВАНИЙ
И СМЕРТЕЙ
В РАЙОНЕ
ТАВРИИ

Справка по району Таврии за 1914 год
(по состоянию на 1 января 1915 года)

Вид заболевания	Всего	Мужчины	Женщины	Дети до 1 года	Дети от 1 года до 14 лет	Взрослые от 15 лет	Смертей
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NOTES TO TABLE IV.

(a) The total in the last column of Table IV. should equal the total in column 10 of Table I., and in column 3 of Table III.

(b) Under Abdominal Tuberculosis are to be included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica.

(c) The total deaths from Congenital Malformations, Premature Birth, Atrophy, Debility, and Marasmus, should equal the total in Table III. under the heading Congenital Debility and Malformation including Premature Birth.

Want of Breast Milk should be included under Atrophy and Debility.

(d) For references to the meaning of any other headings, see notes attached to Table III.

In recording the facts under the various headings of Tables I., II., III., and IV., attention has been given to the notes on the Tables.

WM. COX,
Medical Officer of Health.
February 10th, 1914.

Вид заболевания	Всего	Мужчины	Женщины	Дети до 1 года	Дети от 1 года до 14 лет	Взрослые от 15 лет	Смертей
1	1	1	1	1	1	1	1
2	1	1	1	1	1	1	1
3	1	1	1	1	1	1	1
4	1	1	1	1	1	1	1
5	1	1	1	1	1	1	1
6	1	1	1	1	1	1	1
7	1	1	1	1	1	1	1
8	1	1	1	1	1	1	1
9	1	1	1	1	1	1	1
10	1	1	1	1	1	1	1